To: MaineCare Providers
From: Roger Bondeson – Director of Operations
Date: July 15, 2013
Re: Provider POS claim adjudication reminders

MaineCare would like to remind Pharmacy Providers of several procedural items that have caused claim related questions or have initiated calls to the Pharmacy Helpdesk at Goold Health Systems.

Tribal Notice: Recently the pharmacy helpdesk has received many phone calls in reference to MaineCare members and co-pay status if the member is considered Tribal exempt from co-pays. Member exemption from co-pays is done through the State’s eligibility system and sent to GHS through the State’s member eligibility feed each day. If you believe that a member should be considered Tribal co-pay exempt please utilize the “777 override” in the Prior Authorization field to allow the claim to pay without a co-pay. Please remember each use of the “777 override” for co-pay exemption is reviewed by OMS for proper utilization and may result in a request for proper documentation or recoupment.

Rollover of MaineCare Benefits: We have received many calls from members regarding claims for their prescriptions that are not being processed correctly or that they are receiving co-pays higher than expected. With recent changes in member eligibility and to the hierarchy of benefit levels members may have both full MaineCare (MEPOP) coverage and MaineRx coverage or both Drugs for the Elderly (DEL) coverage and MaineRX coverage. Many times a prior authorization is required for the medication the member is obtaining and because of the multiple benefit levels the member may have the claim roll over to another plan benefit, such as MaineRx, which is a discounted cost program requiring 100% payment by the member. If you as a provider receive the following message when adjudicating a claim: “Member has multiple MaineCare benefits, please verify Plan limitations or call 1-888-420-9711” please know that the drug may be covered under the member’s MaineCare or DEL benefit with a prior authorization. The member does have the right to let this roll to their MaineRx benefit, but if you need to know further information regarding coverage issues please contact the GHS helpdesk at 1-888-420-9711.

X-DEA for Suboxone: In review of MaineCare claims it has come to our attention that claims are being processed for non-Suboxone or non-buprenorphine claims using the X-DEA number. Back in December of 2010 we began requiring use of the X-DEA number on claims for Suboxone or Subutex. Since then we have noticed that many pharmacy providers are also billing claims for other maintenance medications with the X-DEA number. This is a reminder that any non-buprenorphine type prescription should use the providers standard DEA number. MaineCare will be monitoring all stores for correct billing and may begin to reject claims that do not use the correct provider DEA when submitting a claim for processing.

History Claim Adjustments: It has come to our attention that certain claims submitted for reversal have been processed as “historical,” or information-only. This error prevented the reversals from being included in the weekly financial cycles and, as a result, were neither recouped nor included on provider remittance advices. These claims are currently being remediated and will be recouped in batches over the next few months. The first set of claims date back to the Fall of 2009 and include any reversed claim that was processed after MIHMS went live for an original claim that was processed prior to MIHMS. Affected providers will receive an individual letter with a report showing the itemized claims being recouped; offsets will show up as a lump sum debit against your total weekly payment. So as not to unduly burden any provider, offsets will be taken as a percentage of the total each week until the total value has been recouped. Additional information on subsequent batches and the process for remediating those claims will be distributed once this batch has been completed.